City of Columbus | Department of Development | Building Services Division | 757 Carolyn Avenue, Columbus, Ohio 43224

FESTIVAL REGISTRATION WORKSHEET

FOR PUBLIC FESTIVALS ONLY AND LIMITED TO 5 CALENDAR DAYS IN DURATION



TOTAL REGISTRATION FEE SIGNATURE APPLICANT S Please Print Name	Cell Fax Em:	Phone NumberNumber	DATE	
	Cell Fax	Phone Number Numberail Address		
	Cell Fax	Phone Number Numberail Address		
	Cell	Phone Number		
	1110	nt is t		
	Pho			
Contractor's Emergency Festival Contact Person		Please Print Name		
License/Registration #				
Street Address	City	//State	Zip Code	
ELECRICAL CONTRACTOR NAME	Tele	ephone ()	FAX ()	
WILL MANUFACTURED ELECTRICAL ASSEMBLIES BE USED: (Manufactured Electrical Assembles are required		YES □ N y a recognized testing	1 1	
ELECTRICAL INFORMATION				
Number of Tents 2000 sq. ft. or less Incuding those used for continuous and the second secon	ooking or assembly	(Tents over 2000 sq. ft.	require a building permit)	
	is defined as fifty (50) or more person		wood for those most require to committee for mine	
Number of over 2000 sq. ft. Tents used for assembly			used for assembly require a building permit	
Number of over 2000 sq. ft. Tents used for cooking		(Tents over 2000 sq. ft. require a building permit) (Tents over 2000 sq. ft. used for cooking require a building permit)		
Number of Tents over 2000 sq. ft.				
TOTAL NUMBER OF TENTS PROPOSED FOR THE SITE				
FESTIVAL: Run Date TENT INFORMATION	Setup Date	Teard	own Date	
NAME OF FESTIVAL				
FESTIVAL INFORMATION				
EXISTING USE OF THE FESTIVAL SITE PROPERTY				
Email Address				
Address	City	/State	Zip Code	
PUBLIC FESTIVAL ORGANIZER	Te	ephone	FAX	
Street Address	City	//State	Zip Code	
OWNER OF RECORD OF FESTIVAL SITE	Tele	phone	FAX	

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AFFIDAVIT



CAUTION: You alone are responsible for the compliance with City Codes.

Name (please print)			
Street Address		Telephone #	
City/State/Zip		FAX #	
ENT FOR THE PUBLIC FESTIVAL			
☐ CONTRACTOR ☐ OTHER (SPECIFY)			
Agent's Name (please print)			
		Telephone #	
City/State/Zip		FAX #	
FIDAVIT			
(please check one)			
I am the $\ \square$ organizer $\ \square$ agent for organizer of this Pub	lic Festival		
To be located in the City of Columbus, Ohio at			
NUMBER STREET			
Festival Duration: Start Date/Time	End Date/Time		
• I understand that the Registration of my festival does NO	vT include other permits that may h	pe required.	
• I understand that additional permits may be required for	r electric, and/or tents.		
• I will not contract with someone who is not registered by	the City of Columbus to do any red	quired electrical work.	
	•	ppurtenances are inspected and meet all applicable building	
and safety codes and are thusly maintained for the durat			
• I understand that this affidavit is important and I have to	old the truth on it and all attached j	papers.	
PRINT NAME	SIGNATURE		
TRIVI WENE			
Sworn to before me and signed in my presence this	day of	, in the year	

FALSIFICATION OF A PUBLIC DOCUMENT IS A VIOLATION OF THE OHIO REVISED CODE, SECTION 2921.13(A)(5), A MISDEMEANOR OF THE FIRST DEGREE, PUNISHABLE BY UP TO SIX (6) MONTHS IMPRISONMENT AND A FINE OF \$1,000 OR BOTH.